



February 16, 2012

TO: SPLASH Festival vendors

FROM: Stacie Barnum, SPLASH co-chair

RE: Applications

Enclosed is an application form for the 2012 SPLASH Festival. The event will again be hosted by the City of Aberdeen and sponsored by Rich Hartman's Five Star Dealerships. It is on Wednesday, July 4th from 2:00 p.m. to 10:30 p.m. (**Please note the starting time of 2:00 p.m.)

A certificate of insurance for comprehensive liability, with a minimum amount of \$1million per occurrence, naming the City of Aberdeen as an additional insured, is required. You will not be required to purchase a City of Aberdeen business license. Please be sure you look over the map and fee schedule. Spaces are on a first-come-first-serve basis and a space will not be reserved until payment & insurance certificate are received. Your payment must accompany a Vendor Application Form, and you must fill out one form per space. Space Fees are non-refundable. We will have only one vendor space available in the Pavilion and that is the kitchen.

If you are serving or selling food, you need to contact the *Grays Harbor County Health Department* at 360-249-4413, even if you have a Food Handlers Permit/License. This must be done at least 10 working days prior to the event (June 19, 2012).

*We will NOT be allowing the sales of the "spray string", "Pop Its", or potato guns (basically, nothing that makes a mess on the ground).

We are looking forward to another successful year. We will have: inflatable games, a children's carnival, musical entertainment, family entertainment, a huge fireworks show and much more.

If you have any questions, please contact me at 360-537-3248.

Sincerely,

Stacie Barnum, SPLASH co-chair



2012 SPLASH FESTIVAL CRAFT & FOOD VENDOR APPLICATION

Wednesday, July 4th 2012, 2:00 p.m. to 10:30 p.m. at Morrison Riverfront Park

***All spaces are on a first-come-first-serve basis. Payment **MUST** accompany form to reserve space.*

BUSINESS NAME: _____

NAME: _____

ADDRESS: _____

PHONE/EMAIL: _____

INSURANCE COMPANY NAME: _____

POLICY NUMBER: _____

(\$1 million dollar liability insurance, naming the City of Aberdeen as an additional insured required.)

TYPE OF ITEMS SOLD: _____

EQUIPMENT USED FOR SET-UP: _____

DO YOU NEED POWER, IF YES WHAT DO YOU REQUIRE: _____

(\$15 power fee for 1 outlet. Only 1 outlet per vendor. Not all spaces have power available.)

SPACE LOCATION REQUEST:

A. Stage Area (\$55 + pwr fee)

B. Behind TOP Foods (\$45)

C. Behind TOP Foods (\$35)

E. Log Pavilion Kitchen (\$110)
includes power & gas

F. Eastside of Pavilion (\$30 + pwr fee)

G. Westside of Pavilion (\$30 + pwr fee)

1st Choice: _____

2nd Choice: _____

Any Special Requests: _____

**** Craft/Vending booths** in Areas B, C, E, F & G must be set up and ready to go by 1:45 p.m. on the day of the event and must remain open until at least 7:30 p.m. Vendors in Areas A must stay open until 10:00 p.m. NO early clean up.

**** All vendors** need to supply their own tents, tables, chairs, extension cords, water, etc.

**** Only one (1) indoor space** is available in the Log Pavilion, that is the kitchen.

**** Must get permission** for use of generators. Our preference is to have NO generators at the festival.

FOOD VENDORS:

Are you serving food from inside a trailer/vehicle: _____

If yes, what is your L & I Identification number: _____

Does everyone have Food Handler Permits: _____

Food Vendors must contact the Grays Harbor County Health Department, 249-4413, even if you have valid cards, they want to verify that you have all the proper permits.

One vendor space per form. If you are requesting multiple spaces, you must fill out multiple forms.

SPACE FEE: \$ _____ Non refundable.

ELECTRICITY FEE: \$ _____ Non refundable. \$15.00

TOTAL DUE: \$ Non refundable.

Please return this completed form, payment & Insurance certificate to:

Stacie Barnum

City of Aberdeen, 200 East Market Street, Aberdeen, WA 98520

(360) 537-3248

Application must be returned by May 21, 2012

OFFICE USE ONLY

DATE RECEIVED: _____ INSURANCE RECD: _____

AMOUNT RECEIVED: _____

CASH

CHECK

SPACE ASSIGNED: _____

NOTES: _____